

# 2016 Montana Award Form

## Only use this form for the following award categories:

**Veteran-Owned Small Business:** A business that is at least 51% veteran-owned with a successful track record and a commitment to strengthen veteran-owned businesses within the community. Montana-state award only.

**Women-Owned Small Business:** A business that is at least 51% women-owned with a successful track record and a commitment to strengthen woman-owned businesses within the community. Montana-state award only.

**Millennial Entrepreneur:** A business that is at least 51% owned by an individual(s) that is under the age of 35, has a successful track record and fulfills a commitment to strengthen businesses within the community. Montana-state award only.

# **Nomination Package Requirements**

A complete nomination package needs the following:

- 1. SBA Form 3300, Award Nominee Background Form
- 2. Montana Award Form

Nominations are due *no later than January 11<sup>th</sup>*; you may mail them to the following address or email them to crystal.ahmann@sba.gov:

U.S. Small Business Administration Montana District Office 10 West 15<sup>th</sup> Street, Suite 1100 Helena, MT 59626

All information submitted is confidential and is only viewed by select SBA personnel and the judging panel. If you have any questions regarding the judging process please call Crystal at 406.441.1089 or via e-mail at crystal.ahmann@sba.gov.

### NOMINEE INFORMATION

| Business Owner(s) (w/Titles) |  |
|------------------------------|--|
| Business Name                |  |
| Business Address             |  |
| Phone Number                 |  |
| Email                        |  |
| Award Category               |  |
| SIC/NAICS code               |  |

## NOMINATOR'S INFORMATION

| Nominator Name (w/Title)   |  |
|----------------------------|--|
| Business/Organization Name |  |
| Address                    |  |
| Phone Number               |  |
| Email                      |  |

| Provide the nominee(s) percentage of ownership or stock owned in the small business.  |                              |                          |              |   |  |  |
|---|------------------------------|--------------------------|--------------|---|--|--|
| How many years has the nominee's business been operational?   |                              |                          |              |   |  |  |
| How many employees does t   | he business currently have   | e?                       |              |   |  |  |
| Does the business have a we   | bsite? If yes, list the URL: |                          |              |   |  |  |
| To assess the financial performance of the business for the last 3 calendar years, fill out the chart below.  |                              |                          |              |   |  |  |
| Financial Summary   |                              |                          |              |   |  |  |
| Year  | 2012                         | 2013                     | 2014         | 7 |  |  |
| Number of Employees   | 2012                         | 2013                     | 2017         | - |  |  |
| Total Sales   |                              |                          |              | - |  |  |
| Net Profit (Before Tax)   |                              |                          |              | - |  |  |
| Total Assets  |                              |                          |              | † |  |  |
| <b>Total Liabilities</b>  |                              |                          |              | 1 |  |  |
| Net Worth   |                              |                          |              | 1 |  |  |
| Provide a biography for each  | nominee: (may include s      | eparate sheet of paper   | if you wish) |   |  |  |
| Describe the nominee's busin  | ness: (may include separa    | te sheet of paper if you | u wish)      |   |  |  |
| Has the business received SBA assistance (e.g. SBA loan, SCORE counseling, SBDC assistance, WBC assistance, VBOC assistance, contracting, STEP program, or Emerging Leader Initiative)? If yes, please explain (include the amount and date of financial assistance received if applicable)? If yes, please explain (include the amount and date of financial assistance received if applicable): |                              |                          |              |   |  |  |

Provide an explanation on why you feel the business/candidate meets the criteria for the award, per the following criteria for each award:

### **Veteran-owned Small Business Evaluation/Selection Criteria:**

- Evidence of success measured by increased sales and profits
- Growth in number of employees
- Demonstrated potential necessary for continuing long-term business success and economic growth
- Voluntary efforts to strengthen veteran-owned businesses within the community

### Woman-owned Small Business Evaluation/Selection Criteria:

- Evidence of success measured by increased sales and profits
- Growth in number of employees
- Demonstrated potential necessary for continuing long-term business success and economic growth
- Voluntary efforts to strengthen woman-owned businesses within the community

## Millennial Entrepreneur Evaluation/Selection Criteria:

- Evidence of success measured by increased sales and profits
- Growth in number of employees
- Developed or utilization of innovative or creative business methods
- Demonstrates entrepreneurial potential necessary for long-term business success and economic growth